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CONFIRMATION NO. 9231

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/728,389	12/05/2003 RULE	606	3773	SYN-8312
APPLICANTS Kevin Smith, Coral Gables, FL; Matthew Palmer, Miami, FL; Juergen Kortenbach, Miami Springs, FL; Jose Francese, Miami Springs, FL;				
** CONTINUING DATA ***** This appin claims benefit of 60/431,083 12/05/2002 and claims benefit of 60/505,009 09/22/2003 and is a CIP of 10/252,079 09/20/2002 PAT 7,033,378 and is a CIP of 10/252,069 09/20/2002 PAT 6,966,919 and is a CIP of 10/252,078 09/20/2002				
** FOREIGN APPLICATIONS *****				
** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/05/2004				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/JULIAN W WOO/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance <u>Initials</u>	STATE OR COUNTRY FL	SHEETS DRAWINGS 40	TOTAL CLAIMS 87
INDEPENDENT CLAIMS 3				
ADDRESS MAYBACK & HOFFMAN, P.A. 5722 S. FLAMINGO ROAD #232 FORT LAUDERDALE, FL 33330 UNITED STATES				
TITLE Tissue retractor and method for using the retractor				
FILING FEE RECEIVED 2206	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	